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Licensure Unit Staff

## STATE OF NEBRASKA

Division of Public Health - Licensure Unit P.O. Box 94986 - Lincoln, Nebraska 68509-4986 Telephone #: 402-471-2117 nancy herdman@nebraska gov

## TRAINING PROVIDER/SPONSOR FORM

Application for Approval of Continuing Education for Alcohol and Drug Counselors

Date

nancy.herdman@nebraska.gov			7 tioerier and Brag Coarisciols		
Training Provider/Sponsor: Name:					
Address: Street/PO/Route:					
	City:		State:	Zip:	
Provider Repr	 esentative Comp	leting Application:	Name:		
Telephone: 1 Program	Title:				
2 Program (Include	All)				
3 Program (City, St	Location(s)				
4 Hours Requested for Approval (exclusive of breaks, meals, etc.):					
5 How does this training relate to the clinical knowledge and skills of the scope of practice of alcohol and drug counseling.					
Check below to indicate that each of the following items are attached:					
Description of the program content, objectives and methods of presentation.					
Agenda with outline of timeframes for instruction, registration, breaks, meals, etc.					
Name(s) of presenter(s) and resume, curriculum vita, or other documentation of each presenter(s) qualifications.					
Descript	Description of method for monitoring attendance.				
Verification that program is open to all alcohol/drug abuse counselors who meet program prerequisites.					
Scope of practice. (1) The scope of practice for alcohol and drug counseling is the application of general counseling theories and treatment methods adapted to specific addiction theory and research for the express purpose of treating any alcohol or drug abuse, dependence, or disorder. The practice of alcohol and drug counseling consists of the following performance areas which encompass the twelve core functions: Clinical evaluation; treatment planning; counseling; education; documentation; and professional and ethical standards.  (2) The performance area of clinical evaluation consists of screening and assessment of alcohol and drug problems, screening of other presenting problems for which referral may be necessary, and diagnosis of alcohol and drug disorders. Clinical evaluation does not include mental health assessment or treatment. An alcohol and drug counselor shall refer a person with co-occurring mental disorders unless such person is under the care of, or previously assessed or diagnosed by, an appropriate practitioner within a reasonable amount of time.  (3) The performance area of treatment planning consists of case management, including implementing the treatment plan, consulting, and continuing assessment and treatment planning; referral; and client advocacy.  (4) The performance area of counseling consists of individual counseling, group counseling, and family or significant other counseling.  (5) The performance area of education consists of education for clients, family of clients, and the community.					
Signature				Date	
For OFFICE Use Only					
The above tra	ning is:	☐ Approved☐ Denied	I - Hours Approved: Ap	oproval Number:	
Reason for Denial:					
				<u></u>	